

EXHIBIT 2

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

In Re	:	Chapter 11
DELPHI CORPORATION, et al.,	:	Case No. 05-44481 (RDD)
	:	
Debtors.	:	Hon. Robert D. Drain
<hr/>		
DELPHI CORPORATION, et al.,	:	
	:	
Plaintiffs,	:	
Against	:	
	:	
WEST MICHIGAN SPLINE, INC.,	:	Adv. Pro. No. 07-02600 (RDD)
	:	
Defendant.	:	
<hr/>		

DECLARATION OF JOHN DONNELLY

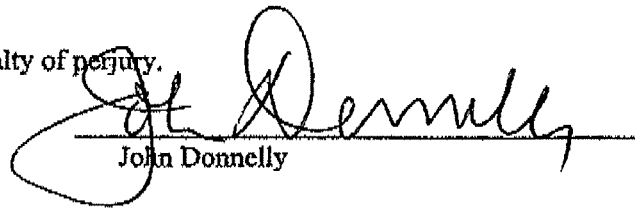
1. I am the President of Cold Forming Technology, Inc. Previously, I was the President of National Broach and Machine, Inc.
2. I make this Declaration on personal knowledge, and if called as a witness, would testify to the facts contained herein.
3. I have over 40 years experience in the automotive supply industry, including in the design, building and sale of machinery and tooling to automotive suppliers.
4. Cold Forming Technology, Inc. is a maker of tools, and has supplied Delphi Corporation and various of its affiliates (collectively, "Delphi"). National Broach and Machine Inc. manufactured machines for the automotive supplier industry. Toolmakers and makers of machinery in the automotive supply industry complement each other, and coordinate with each other in the design, build and sale of machinery and tools to automotive suppliers.
5. I am familiar with the ordinary business practices in 2004 and 2005 in the machine manufacturing and sales industry to automotive industry customers.

6. I have reviewed and am familiar with the attached purchase orders issued by Delphi to West Michigan Spline, Inc. ("WMS") and invoices dated July 14, 2005 and August 31, 2005 from WMS to Delphi.

7. In my opinion, Delphi's obligation to pay WMS was incurred in the ordinary course of business or financial affairs of both WMS and Delphi.

8. I have been advised that Delphi paid the invoices on or about September 6, 2005 and October 6, 2005. In my opinion these payments, made on MNS-2, or second day, second month, payment terms, were ordinary within the machine manufacturing and sales to automotive suppliers industry in 2005.

9. I make this Declaration under penalty of perjury.



John Donnelly

Executed in Sterling Heights, Michigan
On November 22, 2010.

ACTIVE.8442223.1

PAGE 02

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246
DELPHI

PURCHASE PAGE 1
ORDER: S2M81551 2693

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

This order is not binding until accepted. Acceptance should be indicated on acknowledgment copy which should be
returned to Buyer.
On the reverse side Buyer will be the terms and conditions to which Seller agrees by acceptance at the order.
This order, including the terms and conditions on the back and reverse side hereof, constitutes the entire agreement between Buyer and Seller and no other agreement in any way modifying any or all terms and conditions
of this order shall be binding and enforceable by Buyer without the written consent of Seller.
If Government Contract Number is Shown Hereon, Additional Terms and Conditions
Attached Hereon Apply.

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K. HUNTER Buyer
PURCHASING AGENT

WEST MICHIGAN SPLINE

NET 2ND DAY/2ND MTH-10% HLD BK F.O.B. DESTINATION UNLESS OTHERWISE INDICATED SHIP VIA SEE BELOW
DELPHI'S PREFERRED CARRIER

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NOUN NAME	DESCRIPTION	RFQ NUMBER	DATE REQUIRED	TAX CODE %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEASU
------------------	---------------------	-------------------------	-----------	-------------	---------------	---------------	------------	-----------------	-------------------	---------------

0001 1 PR379471 001 **THIS IS A CONFIRMING ORDER DO NOT DUPLICATE**
CONFIRMED WITH: GARY HILL
A/C 350-S Spline Roller S/N 352
STANDARD WMS MODEL 480 SPTIME ROLLER FOR SPLINES.
AND THREADS
REFERENCE RFP 2411
DPR #A4480001
WHO ORDERED: M. ROYOLL/757-4798
03/15/05 B 0.00%
10 - 168515.00
90 - 15/663.50
168515.0000
10 - 31874.00
90 - 28686.60
31874.0000
10 - 205.40
90 - 1850.40
2056.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
EA

0002 1 PR379471 002 AUTO LOAD MACHINE USING ROBOT CONCEPT
WHO ORDERED: M. ROYOLL/757-4798
03/15/05 B 0.00%
10 - 31874.00
90 - 28686.60
31874.0000
10 - 205.40
90 - 1850.40
2056.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
EA

0003 1 PR379471 003 PACKAGE FOR SHIPMENT
WHO ORDERED: M. ROYOLL/757-4798
03/15/05 B 0.00%
10 - 31874.00
90 - 28686.60
31874.0000
10 - 205.40
90 - 1850.40
2056.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
EA

0004 3 PR379471 004 PART LOCATING LIVE CENTERS - HEADSTOCK
WHO ORDERED: M. ROYOLL/757-4798
03/15/05 B 0.00%
10 - 31874.00
90 - 28686.60
31874.0000
10 - 205.40
90 - 1850.40
2056.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
EA

0005 3 PR379471 005 WHO ORDERED: M. ROYOLL/757-4798
03/15/05 B 0.00%
10 - 31874.00
90 - 28686.60
31874.0000
10 - 205.40
90 - 1850.40
2056.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
10 - 75.70 (\$-237.10)
90 - 681.30 ea.
757.0000
EA

001033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE 2

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601
US

US

SHIP TO:

**DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES**

PURCHASE
ORDER: \$2

PAGE 2

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
TO: HOLT AND MEYER

INVOICE TO: SEE INVOICE
INSTRUCTIONS 00
00000

55

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

HOLLAND MI
49424

[illegible]

ORDER DATE	10/12/04	PHONE: 989-757-4071
ALTERATION ISSUE DATE		K HUNTER
ALTERATION EFFECTIVE DATE		S17 Buyer

PURCHASES INC. & AFFILIATES

WEST MICHIGAN SPLINE

ITEM	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	QUANTITY	DESCRIPTION	DATE REQUIRED	TAX CODE %	PRICE	UNIT
0006	1	PR379471 006		PART LOCATING LIVE CENTERS - TAILSTOCK WHO ORDERED: M. ROYOLL/757-4798	03/15/05	B 0.00%	10 - 191.60 90 - 1734.40 Ea.	EA
0007	2	PR379471 007		PART SUPPORT BRACKET WHO ORDERED: M. ROYOLL/757-4798	03/15/05	B 0.00%	1916.0000 90 - 872.10 Ea. 909.0000	EA
0008	2	PR379471 008		PART WEAR PADS FOR SUPPORT BRACKET WHO ORDERED: M. ROYOLL/757-4798	03/15/05	B 0.00%	90 - 970.20 Ea. 1078.0000 10 - 107.80 Ca - 215.60	EA

001033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE

७

11/14/2010 21:47 6163993743 WEST MICHIGAN SPLINE PAGE 04

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246

PURCHASE PAGE 3
ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000
US

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

This order is not binding until accepted. Acceptance should be evidenced by acknowledgment copy which shall be returned to Buyer.
On the reverse side hereof are the terms and conditions to which this order is subject. By acceptance of this order, the Buyer agrees to be bound by the terms and conditions on the reverse side hereof, including the complete and final arbitration clause and shall not be entitled to bring any suit or action in any court of law or equity, state or federal, in connection with this order or the goods or services ordered hereunder. If Government Contract Number is Shown Hereon, additional Terms and Conditions Attached Hereon Apply.

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

AYMENT TERMS
NET 2ND DAY/2ND MTH-10% HLD BK
F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER
SHIP VIA SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	MOON NAME	DESCRIPTION	REQ. NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE MULTIPLY	UNIT MEAS.		
				ORIENTATION TRAINING PROGRAM. THE PROGRAM CONSISTS OF AN EIGHT (8) HOUR TRAINING SESSION, CONDUCTED BY THE GREAT LAKES SAFETY CENTER. ALL CONTRACTOR EMPLOYEES MUST ATTEND THIS TRAINING PRIOR TO COMING TO WORK AT DELPHI SAGINAW SITE. THE COST OF TRAINING IS THE RESPONSIBILITY OF THE CONTRACTOR, NOT DELPHI. TO SCHEDULE THIS TRAINING, YOU MUST CONTACT THE GREAT LAKES SAFETY CENTER AT 989/496-9415 OR 800/675-7539. GREAT LAKES SAFETY CENTER WILL HANDLE THE REGISTRATION PROCESS IN ITS ENTIRETY. CHANGES IN SPECIFICATIONS AFFECTING PRICE AND/OR PURCHASING VIA A PURCHASE ORDER ALTERATION. ANY CHANGES IN DELIVERY DATE FOR ANY REASON WHATSOEVER WILL BE REPORTED PROMPTLY, IN WRITING, TO THE BUYER AND THE "WHO ORDERED" PERSON DESIGNATED WITH DETAILED EXPLANATION. THIS JOB TO CONFORM TO DELPHI SPECIFICATIONS LISTED BELOW. SD-010 DELPHI STANDARD EQUIPMENT SPECIFICATIONS OR SD-000 DELPHI MACHINE AND EQUIPMENT SPECIFICATIONS. TO OBTAIN THESE STANDARDS CONTACT THE "ENGINEER/FOLLOW-UP" OR THE "REC DEPT, NOTIFY" PERSON LISTED ON THE FIRST PAGE OF THIS PURCHASE ORDER. PLEASE RETAIN THESE SPECIFICATIONS FOR FUTURE								

PAGE 05

WEST MICHIGAN SPLINE

11/14/2010 21:47 6163993743

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINIANA
MUNICIPIO EL MARQUES
QUERETARO MX

PURCHASE PAGE 4
ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
TO: 156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
DELPHI
SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

This order is not binding until accepted. Assistance should be obtained on transportation way which should be
returned to Buyer.
On the invoice side Buyer and Seller agree to settle Seller's account by acceptance of this order.
The Seller shall be responsible for the transportation of the goods to the Buyer's location and shall be
responsible for the payment of the freight charges. The Seller shall be responsible for the payment of the
insurance charges. The Seller shall be responsible for the payment of the customs duties and taxes.
The Seller shall be responsible for the payment of the handling charges. The Seller shall be responsible
for the payment of the packing charges. The Seller shall be responsible for the payment of the
shipping charges. The Seller shall be responsible for the payment of the storage charges. The Seller
shall be responsible for the payment of the warehouse charges. The Seller shall be responsible for
the payment of the loading and unloading charges. The Seller shall be responsible for the payment
of the unloading charges. The Seller shall be responsible for the payment of the unloading charges.
If Government Conflict Number is Shown Herein, additional Terms and Conditions
Attached Herein Apply.

ITEM NET 2ND DAY/2ND MTH-10% HLD BK

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	MOON NAME	DESCRIPTION	R-C NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT C WEASU
------------------	---------------------	-------------------------	-----------	-------------	---------------	---------------	-------------	-----------------	-------------------	-----------------

JOBS.
CHANGES IN SPECIFICATION AFFECTING PRICE AND/OR
LEAD TIME, WHETHER INITIATED BY SUPPLIER OR DELPHI
MUST NOT BE MADE WITHOUT PRIOR APPROVAL BY
DELPHI GLOBAL PURCHASING VIA A PURCHASE ORDER
ALTERATION. ANY CHANGES IN DELIVERY DATE FOR ANY
REASON WHATSOEVER WILL BE REPORTED PROMPTLY, IN
WRITING, TO THE BUYER WITH DETAILED EXPLANATION.
*****ATTENTION ALL SUPPLIERS*****
COMPLETE SHIP TO ADDRESS INCLUDING PLANT # MUST BE
ON ALL PACKING SLIPS. IF PROPER INFORMATION IS NOT
INCLUDED PAYMENT WILL BE DELAYED AND/OR MATERIAL
WILL BE RETURNED.

*****SALES TAX CODES*****
PLEASE NOTE OUR SALES TAX CLASSIFICATIONS FOR THIS
PURCHASE ORDER ITEM. BE AWARE OF THE NONTAXABLE
CONDITIONS AND DIRECT PAY PERMITS THAT WE HAVE AND DO
NOT CHARGE US SALES TAX WHERE IT IS NOT APPLICABLE.
SEE FOLLOWING CODES:

- (A) NOT TAXABLE-EXPERIMENTAL ENGINEERING
- (B) NOT TAXABLE-INDUSTRIAL PROCESSING
- (C) NOT TAXABLE-FOR RESALE
- (D) NOT TAXABLE-SALES PROMOTION AND
CONSUMER INFLUENCE. VENDOR
RESPONSIBLE FOR TAX.
- (E) NOT TAXABLE-POLLUTION CONTROL EQUIP.

001033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE

5

PAGE 06

WEST MICHIGAN SPLINE

6163993743

11/14/2010 21:47

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601
US

DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246
DELPHI
SEE INVOICE
INSTRUCTIONS 00
00000
US

PURCHASE

PAGE 5

ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
12) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.
ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

This order is not binding until accepted. Acceptance should be indicated on acknowledgment copy which should be returned to Buyer.
On the reverse side there are the terms and conditions to which Seller agrees by acceptance at this order.
This order, including the terms and conditions on the front and reverse side hereof, contains the complete and final agreement between the parties and no other agreement, oral or written, shall be binding on the parties.
If Government Contract Number is Shown Hereon, additional Terms and Conditions Attached Herein Apply.

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	QUANTITY	DESCRIPTION	RFG NUMBER	DATE REQUIRED	TAX CODE	%	BASE UNIT PRICE	PRICE UNIT
---------------	------------------	-------------------------	----------	-------------	------------	---------------	----------	---	-----------------	------------

(F) TAXABLE-DO NOT BILL TAX. BUYER HAS
DIRECT PAY PERMIT.
(G) NOT TAXABLE-SERVICE VENDOR-LABOR ONLY
(H) NOT TAXABLE-DO NOT BILL-FOR CONSUMPTION IN MEXICO.
(I) MATERIAL ONLY TAXABLE-CONSTRUCTION CONTRACTOR RESPONSIBLE FOR SALES TAX ON MATERIAL

SALES TAX EXEMPTION CERTIFICATES
ALABAMA 805 OHIO 95-002667
GEORGIA 300-45870-B TEXAS 1-38-3431131-1
INDIANA 1018702130011 WISCONSIN WDP-99-01-010037
KANSAS 98-003A MICHIGAN 38-3431131
MISSISSIPPI APPLIED FOR NEW JERSEY APPLIED FOR
NEW YORK DP-3487

RIGHT TO AUDIT
(ZH)
BY ACCEPTANCE OF A PURCHASE ORDER THE SELLER OF GOODS AND/OR SERVICES GRANTS BUYER THE RIGHT TO AUDIT ALL CHARGES AND AGREES THAT ALL RECORDS SUPPORTING CHARGES (INCLUDING THOSE OF SUBSIDIARIES AND AFFILIATES TO WHOM WORK HAS BEEN CONTRACTED) WILL BE AVAILABLE FOR AUDIT BY DELPHI FOR A PERIOD OF ONE (1) YEAR BEYOND FINAL PAYMENT.
FAX NUMBER FOR KEN HUNTER: 989/757-5884
TO ENSURE PROMPT PAYMENT YOU WILL NEED TO ADHERE TO THE FOLLOWING GUIDELINES:

11/14/2010 21:47 6163993743

WEST MICHIGAN SPLINE

PAGE 07

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO: DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND L BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

PURCHASE PAGE 6
ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO: SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attach Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

The order is not binding until accepted. Acceptance should be indicated on acknowledgment copy which should be
returned to Buyer.
On the packing slip, insert the name and address to which Shipper agrees by acceptance of this order.
This order, including the terms and conditions on the back and reverse side hereof, contains the contract and shall
supersede all other contracts, conditions, terms and conditions of sale.
If Government Contract Number is Shown Hereon, additional Terms and Conditions
Attached Herein Apply.

NET 2ND DAY/2ND MTH-10% HLDBK

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NO. IN NAME	DESCRIPTION	RTO NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEASURE	
		ADVISE THE BUYER OF ANY DISCREPANCIES ON THE PURCHASE ORDER PRIOR TO SHIPMENT. CONVEY THIS INFORMATION VIA BOTH PHONE AND HARD COPY. REFER TO BOTH THE PURCHASE ORDER NUMBER AND THE ITEM NUMBER (E-MAIL TO KEN.J.HUNTER@DELPHIAUTO.COM) THE UNIT OF MEASURE ON THE PACKING SLIP MUST BE THE SAME AS THE PURCHASE ORDER UNIT OF MEASURE. WAIT FOR PAYMENTS TO BE MADE THE 2ND DAY OF THE 2ND MONTH AFTER RECEIPT BEFORE BEING CONCERNED. IF PAYMENT HAS NOT OCCURRED BY THE 2ND DAY 2ND MONTH AND IN THE CASE OF SERVICES TYPE ORDERS CALL THE PERSON DESIGNATED AS "WHO ORDERED" OR THE "DELIVER TO" PERSON TO CONFIRM IF A RECEIPT HAS BEEN ELECTRONICALLY ENTERED AUTHORIZING THE PAYMENT CYCLE TO BEGIN. IF IT CAN BE CONFIRMED THAT A RECEIPT HAS BEEN ENTERED YOU CAN CALL "DISBURSEMENT SERVICE" TO CHECK ON THE STATUS OF THE PAYMENT. YOU WILL NEED YOUR COMPANY'S (9) DIGIT DUN AND BRADSTREET ACCOUNT NO. ALL DOMESTIC DELIVERIES ARE TO BE SHIPPED FOR SHIPPING POINT. ALL INTERNATIONAL DELIVERIES ARE TO SHIPPED FCA (ORIGIN), TTOP (TITLE TRANSFER DELPHI PLANT). CONTACT THE FOLLOWING CARRIERS WHERE APPLICABLE: DOMESTIC SHIPPING AND ROUTING INSTRUCTIONS TO DELPHI SAGINAW, MI AND ATHENS, AL PLANTS ONLY.								

101033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE

7

PAGE 08

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246

PURCHASE PAGE 7
ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.
ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K. HUNTER
S17 Buyer
PURCHASING AGENT

WEST MICHIGAN SPLINE

NET 2ND DAY/2ND MTH-10% HLD BK

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	ACQU NAME	DESCRIPTION	REQ. NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE UNIT MULTIPLE
				LESS THAN 150 POUNDS-UPS CONSIGNEE BILLING IS HOW THE SHIPMENT SHOULD BE CALLED INTO UPS, NOT COLLECT OR PREPAID. ALL PACKAGES SHOULD WEIGH NO MORE THAN 40 POUNDS OR LESS. IF PRACTICAL, PLANT NUMBER MUST BE ON THE LABEL; FOR ITEMS COLLECTIVELY WEIGHING 150 POUNDS-12,000 POUNDS PLEASE USE THE FOLLOWING CARRIERS: DESTINATION DELPHI SAGINAW, MI PLANTS MI, IN, IL, WI, OH ONTARIO, CANADA ALL OTHER STATES (ACCOUNT NUMBERS WILL BE PROVIDED AT TIME OF PURCHASE ORDER) DESTINATION DELPHI ATHENS, AL PLANTS MI, IN, IL, WI, OH, AND ONTARIO, CANADA U.S.F. HOLLAND ALL OTHER STATES CENTRAL TRANSPORT CONTACT THE FOLLOWING CARRIERS WHERE APPLICABLE: USA \- / CANADA \- / MEXICO \- / USA ARTISAN AND ASSOCIATES 800/338/6486 ***** NORTH AMERICA TO/FROM SOUTH AMERICA NORTH AMERICA TO/FROM EUROPE EUROPE TO/FROM SOUTH AMERICA EUROPEAN COUNTRY TO/FROM EUROPEAN COUNTRY SOUTH AMERICA TO/FROM ASIA PANALPINA 800/743-9386					

PAGE 09

WEST MICHIGAN SPLINE

6163993743

11/14/2010 21:47

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601
US

SHIP TO:

DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

MX

PURCHASE

PAGE 8

ORDER: S2M81551

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00

US

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

This order is not binding until accepted. Acceptance should be evidenced by a signed copy of this order.
On the reverse side of this order, the terms and conditions to which Seller agrees by acceptance of this order.
This order, including the terms and conditions on the back and reverse side hereof, contains the complete and final
agreement between the parties. No other terms, conditions, or warranties shall be binding upon the Buyer unless made in writing and signed by Buyer's authorized representative.
If Government Contract Number is Shown Hereon, additional Terms and Conditions
Attached Herein Apply.

ORDER DATE 10/12/04
ALLOCATION ISSUE DATE
ALLOCATION EFFECTIVE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

AVMENT TERMS
NET 2ND DAY/2ND MTH-10% HLD BK
F.O.B. DELPHI'S PREFERRED CARRIER
SHIP VIA SEE BELOW

REQ SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	MOON NAME	DESCRIPTION	RFC NUMBER	DATE REQUIRED	TAX CODE %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT WEIGHT
-----------------	---------------------	-------------------------	-----------	-------------	---------------	---------------	------------	-----------------	-------------------	----------------

NORTH AMERICA TO/FROM ASIA
ASIA TO/FROM EUROPE
DANZAS/AIR EXPRESS INTERNATIONAL 800/251-9019

NORTH AMERICA TO/FROM INDIA
CIRCLE/EAGLE 630/766-9220

WHEN CALLING FOR SHIPPING AND ROUTING INSTRUCTIONS
HAVE THE FOLLOWING INFORMATION AVAILABLE:
SHIPPER NAME, ADDRESS (CITY, STATE, AND ZIP CODE)
NAME OF CONTACT AND PHONE NUMBER
CONSIGNEE (RECEIVING DESTINATION) NAME, ADDRESS,
(CITY, STATE, AND ZIP CODE)
NAME OF CONTACT AND PHONE NUMBER
DIMENSION (LENGTH X WIDTH X HEIGHT)
WEIGHT

*THIS WILL DETERMINE THE SIZE/STYLE OF SEA
CONTAINER OR SIZE OF AIRPLANE
**ANY TIME A BOARDER IS CROSSED, IT MUST BE ACCOM-
PAINED BY A COMMERCIAL PRICE PACKING SLIP/INVOICE,
WHICH INCLUDES THE FOLLOWING:
LETTERHEAD AT THE TOP
DATE, DESTINATION, SHIPPER NUMBER
CONTENTS, QUANTITY, UNIT PRICE, TOTAL PRICE
COUNTRY OF ORIGIN
PURCHASE ORDER NUMBER

001033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE 9

DELPHI

IDELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601 US

SHIP TO:

5

DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

PURCHASE

PAGE 9

ORDER: S2M81551

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI

INVOICE TO

SEE INVOICE
INSTRUCTIONS 00
00000

55

(2) copies of your packing slip must accompany each shipment.
This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

The agent is a binding contract. *Amateurize* should be attached as advertisement copy which then is returned to Buyer.

On the reverse side turn off the time gap cardstock in which Seller prints, by conclusion of the sale. This may, including the turn off conditions on the time gap reverse side, require the complete and total approval of Buyer and Seller to be fully approved. At any time, making any of the terms and conditions of the contract, Seller may be subject to any change in the contract.

If Government Contract Number is Shown (Hanson, additional Terms and Conditions Attached Herein Apply:

ORDER DATE	10/12/04	PHONE: 989-151-4011
ALTERATION ISSUE DATE		K HUNTER
	\$17	Buyer

ALTERATION EFFECTIVE
DATE

POSSIBILITIES ARISE

2ND DAY/2ND MTH-10% HLBKKT
NET

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SEE BELOW

ITEM SOURCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NAME	DESCRIPTION	REQ NUMBER	DATE REQUIRED	TAX CODE %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEAS
----------------	---------------------	-------------------------	------	-------------	---------------	---------------	------------	-----------------	-------------------	--------------

SIGNATURE AND TITLE

WARRANTY PERIOD BEGINS AT START OF PRODUCTION.

THIS IS A CAPITAL EQUIPMENT OR CONSTRUCTION
INVOICELESS PURCHASE ORDER.
1. SEND ALL PRICED PACKING SLIPS (OR INVOICES IF
YOU PREFER) PERTAINING TO THIS ORDER TO
MARK ROYOLL/989-757-4798
2. ADDRESS AND MAIL YOUR PRICED PACKING SLIPS (OR
INVOICE) DIRECTLY TO THIS PERSON AT THE ADDRESS
LISTED ABOVE UNDER "INVOICE TO". THIS PERSON WILL
BE YOUR POINT OF CONTACT FOR ALL MATTERS PERTAINING
TO PAYMENT OF THIS PURCHASE ORDER. COMPLIANCE TO
THESE GUIDELINES WILL PROMOTE PROMPT PAYMENT.

TERMS AND CONDITIONS JANUARY 2001, APPLY
OF WHICH SUPPLIER HAS RECEIVED A COPY.

001033 USER SUZANNE J BEARDSLEY

ORIGINAL

LAST PAGE

PAGE 11

WEST MICHIGAN SPLINE

6163993743

11/14/2010 21:47

DELPHI

6/26/05

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246
DELPHI
INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

PURCHASE

PAGE 1

ORDER: S2M81551 001
A L T E R A T I O N ###
This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.

Invoice Attn: Accounts Payable
Do not Deduct Valuation of Express Shipments or Insure Parcel
Post.

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
TO: 156 MANUFACTURERS DR
HOLLAND MI
49424

This Order is not binding until accepted. Acceptance should be recorded as delivery receipt only when received as
intended to be delivered.
On the reverse side of this Order are the terms and conditions which apply to the purchase of this order.
This order, including the terms and conditions on the back and center side sheet, defines the complete and final
agreement between Buyer and Seller and no other agreement in any way modifying any of the terms and conditions
set forth in this Order shall be binding unless made in writing and signed by Buyer's authorized representative.
If the Seller is not a member of the International Contract Number 79-870-1702, additional terms and conditions
Applicable to this Order apply.

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE 02/22/05
ALTERNATION EFFECTIVE DATE 02/22/05
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

SHIP VIA SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NOVN NAME	DESCRIPTION	REQ NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT
10009	1	PR379471 009	### THIS ITEM HAS BEEN ADDED ###	NEW RACK BOX TO HOLD SPLINE RACKS. WHO ORDERED: M.ROYVOLL/757-4798		05/17/05	B 0.00%	45543.0000		PC
10010	1	PR379471 010	### THIS ITEM HAS BEEN ADDED ###	DESIGN AND BUILD LOADER, ENTRANCE CHUTE, EXIT CHUTE MOUNTING BRACKET, PART SUPPORT BRACKET, AND LIMIT SWITCHES FOR I-SHAFT WHO ORDERED: M.ROYVOLL/757-4798		05/17/05	B 0.00%	12980.0000		PC
10011	1	PR379471 011	### THIS ITEM HAS BEEN ADDED ###	INSTALL TWO POSITION TAILSTOCK WHO ORDERED: M.ROYVOLL/757-4798		05/17/05	B 0.00%	4390.0000		PC

001464 USER SUZANNE J BEARDSLEY ORIGINAL CONTINUING PAGE 2

PAGE 12

WEST MICHIGAN SPLINE

6163993743

11/14/2010 21:47

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:

DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

PURCHASE

PAGE 2

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

US

ORDER: S2M81551 001
A L T E R A T I O N ###
This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.
ORDER DATE 10/12/04
ALTERNATION ISSUE DATE 02/22/05
ALTERNATION EFFECTIVE 02/22/05
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

The above is not binding until accepted. Acceptance, should be indicated by return of signed copy which should be returned to the supplier.
On the invoice title, insert the item and condition as written before signed by acceptance of this order.
This order, including the terms and conditions on the back and invoice, constitutes the complete and final agreement between Buyer and Seller and no other agreement or any oral modification of this order and conditions will be binding upon the Buyer unless made in writing and signed by Buyer, authorized representative.
If Government Contract Number is shown hereon, additional terms and conditions attached thereto apply.

PAYMENT TERMS
NET 2ND DAY/2ND MTH-10% HLDBK
F.D.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NOUN NAME	DESCRIPTION	R.F.O. NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEASURE
------------------	---------------------	-------------------------	-----------	-------------	------------------	---------------	-------------	-----------------	-------------------	-----------------

00012 1 PR379471 012

THIS ITEM HAS BEEN ADDED ##
LABOR TO INSTALL CHANGES AND PROVIDE RUN-OFF
WHO ORDERED: M.ROYOLL/757-4798

8456.0000
90 - 7610.40
10 - 845.60

PC

Grand Total . 282428.00
9896 - Ent. 9/6/05 254 185.20
10010 @ 28242.80

0001464 USER SUZANNE J BEARDSLEY

ORIGINAL

LAST PAGE

PAGE 02

WEST MICHIGAN SPLINE

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI 48601

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX 76246

PURCHASE
ORDER: S2M81552

PAGE 1

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI 49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

THE ORDER IS LISTED IN THE FOLLOWING CURRENCY
USD DOLLAR (UNITED STATES)
THIS IS A CONFIRMING ORDER DO NOT DUPLICATE
CONFIRMED WITH: GARY HILL

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

NET 2ND DAY/2ND MTH-10% HLDBK DELPHI'S PREFERRED CARRIER DESTINATION UNLESS OTHERWISE INDICATED
SHIP VIA SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	MOON NAME	DESCRIPTION	RFO NUMBER	DATE REQUIRED	TAX CODE %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEAS
------------------	---------------------	-------------------------	-----------	-------------	---------------	---------------	------------	-----------------	-------------------	--------------

0001	1	PR379470 001		STANDARD WMS MODEL 48D - SPLINE ROLLER FOR SPLINES AND THREADS REFERENCE RFP 2412 DPR #A4480002 TAG #140080 WHO ORDERED: M. ROYOLL/757-4798		04/12/05	B 0.00%	282299.0000		PC
------	---	--------------	--	--	--	----------	---------	-------------	--	----

0002	1	PR379470 002		AUTOLoad MACHINE USING ROBOT CONCEPT WHO ORDERED: M. ROYOLL/757-4798		04/12/05	B 0.00%	58249.0000		PC
------	---	--------------	--	---	--	----------	---------	------------	--	----

0003	1	PR379470 003		PACKAGE FOR SHIPMENT WHO ORDERED: M. ROYOLL/757-4798		04/12/05	B 0.00%	2056.0000		PC
------	---	--------------	--	---	--	----------	---------	-----------	--	----

0004	3	PR379470 004		PART LOCATING LIVE CENTERS - HEADSTOCK WHO ORDERED: M. ROYOLL/757-4798		04/12/05	B 0.00%	757.0000		EA
------	---	--------------	--	---	--	----------	---------	----------	--	----

0005	3	PR379470 005				04/12/05	B 0.00%	757.0000		EA
------	---	--------------	--	--	--	----------	---------	----------	--	----

01033 USER SUZANNE J BEARDSLEY ORIGINAL CONTINUE PAGE 2

PAGE 83

WEST MICHIGAN SPLINE

6163993743

11/14/2010 21:42

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:

DELPHI SAGINAW ACE, PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246
DELPHI

PURCHASE

PAGE 2

ORDER: S2M81552

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:

SEE INVOICE
INSTRUCTIONS 00
00000

US

MX

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
(Item Identification Number) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer

This order is not binding until accepted. Acceptance should be indicated by return of the invoice, very which should be
returned to Buyer.
The invoice is not binding until accepted. Acceptance should be indicated by return of the invoice, very which should be
returned to Buyer.
The invoice is not binding until accepted. Acceptance should be indicated by return of the invoice, very which should be
returned to Buyer.

ALTERATION EFFECTIVE
DATE

PURCHASING AGENT

NET 2ND DAY/2ND MTH-10% HLD BK

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

ITEM SEQUENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NOIN NAME	DESCRIPTION	RFO NUMBER	DATE REQUIRED	TAX CODE / %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT MEASURE
0006	3	PR379470 006	PART LOCATING LIVE CENTERS - HEADSTOCK WHO ORDERED: M.ROYOLL/757-4798			04/12/05	B 0.00%	10-385.60 (#568) 90-3470.40 3856.0000		EA
0007	3	PR379470 007	PART SUPPORT BRACKET WHO ORDERED: M.ROYOLL/757-4798			04/12/05	B 0.00%	10-96.90 (2967) 90-872.10 (969.0000)		EA
0008	3	PR379470 008	PART WEAR PADS FOR SUPPORT BRACKET WHO ORDERED: M.ROYOLL/757-4798			04/12/05	B 0.00%	(3231) 90-969.30 (1077.0000)		EA
RACK SPACERS WHO ORDERED: M.ROYOLL/757-4798 ATTENTION***** SUPPLIER AGREES TO A CHARGE OF 1.00% PER WEEK FOR EACH WEEK THE SUPPLIER IS LATE FROM THE AGREED UPON DELIVERY DATE. ADDITIONAL CHARGES INCURRED BY THE SUPPLIER TO ACHIEVE AGREED UPON DELIVERY DATE ARE THE SUPPLIER'S RESPONSIBILITY AND WILL NOT BE REIMBURSED BY DELPHI. ATTENTION ALL CONSTRUCTION/MAINTENANCE CONTRACTORS: ALL CURRENT AND POTENTIAL DELPHI SAGINAW SITE CONSTRUCTION/MAINTENANCE CONTRACTORS MUST ATTEND A MANDATORY SAFETY AND HEALTH										

OK

364 852-
10010

101033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE 3

11/14/2010 21:42 6163993743

WEST MICHIGAN SPLINE

PAGE 04

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

SHIP TO:
DELPHI SAGINAW ACE, PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246

PURCHASE PAGE 3
ORDER: S2M81552

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
DELPHI
SEE INVOICE
INSTRUCTIONS 00
00000

This Number Must Appear On All Invoices, Packing Slips,
Packages and Bills of Lading.
12) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and
Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel
Post.

This order is not binding until accepted. Acceptance must be evidenced by a signed acknowledgment copy which shall be
returned to the originator within 10 days of the date of receipt. If no acknowledgment is received within 10 days, the order shall be
considered accepted. This order is not binding until accepted. Acceptance must be evidenced by a signed acknowledgment copy which shall be
returned to the originator within 10 days of the date of receipt. If no acknowledgment is received within 10 days, the order shall be
considered accepted. This order is not binding until accepted. Acceptance must be evidenced by a signed acknowledgment copy which shall be
returned to the originator within 10 days of the date of receipt. If no acknowledgment is received within 10 days, the order shall be
considered accepted.

ORDER DATE 10/12/04
ALTERNATION ISSUE DATE
ALTERNATION EFFECTIVE DATE
PHONE: 989-757-4071
K HUNTER
S17 Buyer
PURCHASING AGENT

SHIP VIA
NET 2ND DAY/2ND MTH-10% HLD BK DELPHI'S PREFERRED CARRIER SEE BELOW

ITEM	QUANTITY	ITEM IDENTIFICATION NO.	DESCRIPTION	REF. NUMBER	DATE REQUIRED	TAX CODE	%	BASE UNIT PRICE	PRICE MULTIPLE	UNIT OF MEASURE
NET	2ND DAY/2ND MTH-10% HLD BK		DELPHI'S PREFERRED CARRIER							

ORIENTATION TRAINING PROGRAM. THE PROGRAM CONSISTS OF AN EIGHT (8) HOUR TRAINING SESSION, CONDUCTED BY THE GREAT LAKES SAFETY CENTER. ALL CONTRACTOR EMPLOYEES MUST ATTEND THIS TRAINING PRIOR TO COMING TO WORK AT DELPHI SAGINAW SITE.
THE COST OF TRAINING IS THE RESPONSIBILITY OF THE CONTRACTOR, NOT DELPHI.
TO SCHEDULE THIS TRAINING, YOU MUST CONTACT THE GREAT LAKES SAFETY CENTER AT 989/496-9415 OR 800/675-7599.
GREAT LAKES SAFETY CENTER WILL HANDLE THE REGISTRATION PROCESS IN ITS ENTIRETY.
CHANGES IN SPECIFICATIONS AFFECTING PRICE AND/OR PURCHASING VIA A PURCHASE ORDER ALTERATION. ANY CHANGES IN DELIVERY DATE FOR ANY REASON WHATSOEVER WILL BE REPORTED PROMPTLY, IN WRITING, TO THE BUYER AND THE "WHO ORDERED" PERSON DESIGNATED WITH DETAILED EXPLANATION.
THIS JOB TO CONFORM TO DELPHI SPECIFICATIONS LISTED BELOW:
SD-010 DELPHI STANDARD EQUIPMENT SPECIFICATIONS OR SD-000 DELPHI MACHINE AND EQUIPMENT SPECIFICATIONS.
TO OBTAIN THESE STANDARDS CONTACT THE "ENGINEER/FOLLOW-UP" OR THE "REC DEPT. NOTIFY" PERSON LISTED ON THE FIRST PAGE OF THIS PURCHASE ORDER. PLEASE RETAIN THESE SPECIFICATIONS FOR FUTURE ORDER.

001033 USER SUZANNE J BEARDSLEY ORIGINAL CONTINUE PAGE 4

THE

SHIP TO:
IDELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

PAGE 5
2

INVOICE TO: SEE INVOICE
INSTRUCTIONS 00
00000

5

四六

(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

HOLLAND MI
49424

[illegible]

ORDER DATE	10/12/04	PHONE: 989-757-4071
ATTENTION	ISSUE DATE	K HUNTER
		S17 Buyer

ALTERATION EFFECTIVE
DATE

PURCHASING AGENT

DESTINATION UNLESS OTHERWISE INDICATED
DELPH'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

MY NAME IS

2ND DAY/2ND MTH-10% HLD BK

DESTINATION UNLESS OTHERWISE INDICATED
DELPH'S PREFERRED CARRIER

SHIP VIA
SEE BELOW

THEY EQUEN

QUANTITY
ORDERED

EM IDENTIFICATION NO.

AME

DESCRIPTION

FFQ	NUMBER
1	1
2	1
3	1
4	1
5	1
6	1
7	1
8	1
9	1
10	1
11	1
12	1
13	1
14	1
15	1
16	1
17	1
18	1
19	1
20	1
21	1
22	1
23	1
24	1
25	1
26	1
27	1
28	1
29	1
30	1
31	1
32	1
33	1
34	1
35	1
36	1
37	1
38	1
39	1
40	1
41	1
42	1
43	1
44	1
45	1
46	1
47	1
48	1
49	1
50	1
51	1
52	1
53	1
54	1
55	1
56	1
57	1
58	1
59	1
60	1
61	1
62	1
63	1
64	1
65	1
66	1
67	1
68	1
69	1
70	1
71	1
72	1
73	1
74	1
75	1
76	1
77	1
78	1
79	1
80	1
81	1
82	1
83	1
84	1
85	1
86	1
87	1
88	1
89	1
90	1
91	1
92	1
93	1
94	1
95	1
96	1
97	1
98	1
99	1
100	1

DATE REQUIRED

TAX CODE/ %

BASE UNIT PRICE

PRICE	UNIT
-------	------

(F) TAXABLE-DO NOT BILL TAX. BUYER HAS
DIRECT PAY PERMIT.
(G) NOT TAXABLE-SERVICE VENDOR-LABOR ONLY
(H) NOT TAXABLE-DO NOT BILL-FOR CONSUMP-
TION IN MEXICO.
(I) MATERIAL ONLY TAXABLE-CONSTRUCTION

SALES TAX EXEMPTION CERTIFICATES	
ALABAMA 805	OHIO 95-002667
GEORGIA 300-45870-B	TEXAS 1-38-3431131-1
INDIANA 1018702130011	WISCONSIN WDP-99-01-010037
KANSAS 98-003A	MICHIGAN 38-3431131
MISSISSIPPI APPLIED FOR	NEW JERSEY APPLIED FOR
NEW YORK DP-3487	

BY ACCEPTANCE OF A PURCHASE ORDER THE SELLER OF GOODS AND/OR SERVICES GRANTS BUYER THE RIGHT TO AUDIT ALL CHARGES AND AGREES THAT ALL RECORDS SUPPORTING CHARGES (INCLUDING THOSE OF SUBSIDIARIES AND AFFILIATES TO WHOM WORK HAS BEEN CONTRACTED) WILL BE AVAILABLE FOR AUDIT BY DELPHI FOR A PERIOD OF ONE (1) YEAR BEYOND FINAL PAYMENT. FAX NUMBER FOR KEN HUNTER: 989/757-5884 TO ENSURE PROMPT PAYMENT YOU WILL NEED TO ADHERE TO THE FOLLOWING GUIDELINES:

101033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE

८५

תורה

SHIP TO: IDELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE INDL BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX

PURCHASE PAGE 6
ORDER: 52M81552

INVOICE TO: SEE INVOICE
INSTRUCTIONS 00
00000

55

This Number must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

49424

My order for the above described goods is hereby confirmed by acceptance of this order. The undersigned hereby warrants that the goods are as described and that the same are free from all liens and claims of third parties. The undersigned hereby warrants that the goods are as described and that the same are free from all liens and claims of third parties. The undersigned hereby warrants that the goods are as described and that the same are free from all liens and claims of third parties.

ORDER DATE 10/12/04	PHONE: 989-757-4071 K HUNTER
ALTERATION ISSUE DATE	S17 Buyer
ALTERATION EFFECTIVE DATE	BRIDGESIDE VACANT

PAYMENT TERMS

2ND DAY/2ND MTH-10% HLD BK

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPH'S PREFERRED CARRIER

SEE BELOW

[illegible]

ADVISE THE BUYER OF ANY DISCREPANCIES ON THE PURCHASE ORDER PRIOR TO SHIPMENT. CONVEY THIS INFORMATION VIA BOTH PHONE AND HARD COPY. REFER TO BOTH THE PURCHASE ORDER NUMBER AND THE ITEM NUMBER (E-MAIL TO KEN.J.HUNTER@DELPHIAUTO.COM)

THE UNIT OF MEASURE ON THE PACKING SLIP MUST BE THE SAME AS THE PURCHASE ORDER UNIT OF MEASURE. WAIT FOR PAYMENTS TO BE MADE THE 2ND DAY OF THE 2ND MONTH AFTER RECEIPT BEFORE BEING CONCERNED. IF PAYMENT HAS NOT OCCURRED BY THE 2ND DAY 2ND MONTH AND IN THE CASE OF SERVICES TYPE ORDERS CALL THE PERSON DESIGNATED AS "WHO ORDERED" OR THE "DELIVER TO" PERSON TO CONFIRM IF A RECEIPT HAS BEEN ELECTRONICALLY ENTERED AUTHORIZING THE PAYMENT CYCLE TO BEGIN.

IF IT CAN BE CONFIRMED THAT A RECEIPT HAS BEEN ENTERED YOU CAN CALL "DISBURSEMENT SERVICE" TO CHECK ON THE STATUS OF THE PAYMENT. YOU WILL NEED YOUR COMPANY'S (9) DIGIT DUN AND BRADSTREET ACCOUNT NO. ALL DOMESTIC DELIVERIES ARE TO BE SHIPPED FOB SHIPPING POINT. ALL INTERNATIONAL DELIVERIES ARE TO SHIPPED FCA (ORIGIN), TOP (TITLE TRANSFER DELPHI PLANT)). CONTACT THE FOLLOWING CARRIERS WHERE APPLICABLE:
DOMESTIC SHIPPING AND ROUTING INSTRUCTIONS TO DELPHI SAGINAW, MI AND ATHENS, AL PLANTS ONLY.

01033 USER SUZANNE J BEARDSLEY

ORIGINAL

CONTINUE PAGE 7

11/14/2010 21:42 6163993743

WEST MICHIGAN SPLINE

PAGE 09

DELPHI

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI
48601

US

SHIP TO:
DELPHI SAGINAW ACE, PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246

PURCHASE

PAGE 8

ORDER: S2M81552

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI
49424

INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000

US

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment. Item Identification Number(s) must be shown on Packing Slips and invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

The agent is not liable for any loss or damage to goods in transit. This order, including the terms and conditions on the back and any other documents, is subject to the terms and conditions of the contract between Buyer and Seller and no other agreement is valid until it is signed by Buyer's authorized representative. If Government Contract Number is shown hereon, additional Terms and Conditions Attached hereto apply.

NET 2ND DAY/2ND MTH-10% HLD BK F.O.B. DELPHI'S PREFERRED CARRIER SHIP VIA SEE BELOW

ITEM	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	NOVN NAME	DESCRIPTION	RFO NUMBER	DATE REQUIRED	TAX CODE/ %	BASE UNIT PRICE	PRICE SHIP TO MULTIPLE MEASUR

NORTH AMERICA TO/FROM ASIA									
ASIA TO/FROM EUROPE									
DANZAS/AIR EXPRESS INTERNATIONAL 800/251-9019									

NORTH AMERICA TO/FROM INDIA									
CIRCLE/EAGLE 630/766-9220									
WHEN CALLING FOR SHIPPING AND ROUTING INSTRUCTIONS HAVE THE FOLLOWING INFORMATION AVAILABLE: SHIPPER NAME, ADDRESS (CITY, STATE, AND ZIP CODE) NAME OF CONTACT AND PHONE NUMBER CONSIGNEE (RECEIVING DESTINATION) NAME, ADDRESS, (CITY, STATE, AND ZIP CODE) NAME OF CONTACT AND PHONE NUMBER DIMENSION (LENGTH X WIDTH X HEIGHT) WEIGHT									
*THIS WILL DETERMINE THE SIZE/STYLE OF SEA CONTAINER OR SIZE OF AIRPLANE **ANY TIME A BOARDER IS CROSSED, IT MUST BE ACCOM- PAINED BY A COMMERCIAL PRICE PACKING SLIP/INVOICE, WHICH INCLUDES THE FOLLOWING: LETTERHEAD AT THE TOP DATE, DESTINATION, SHIPPER NUMBER CONTENTS, QUANTITY, UNIT PRICE, TOTAL PRICE COUNTRY OF ORIGIN PURCHASE ORDER NUMBER									

NORTH AMERICA TO/FROM ASIA

ASIA TO/FROM EUROPE

DANZAS/AIR EXPRESS INTERNATIONAL 800/251-9019

NORTH AMERICA TO/FROM INDIA

CIRCLE/EAGLE 630/766-9220

WHEN CALLING FOR SHIPPING AND ROUTING INSTRUCTIONS

HAVE THE FOLLOWING INFORMATION AVAILABLE:

SHIPPER NAME, ADDRESS (CITY, STATE, AND ZIP CODE)

NAME OF CONTACT AND PHONE NUMBER

CONSIGNEE (RECEIVING DESTINATION) NAME, ADDRESS,

(CITY, STATE, AND ZIP CODE)

NAME OF CONTACT AND PHONE NUMBER

DIMENSION (LENGTH X WIDTH X HEIGHT)

WEIGHT

*THIS WILL DETERMINE THE SIZE/STYLE OF SEA
CONTAINER OR SIZE OF AIRPLANE
**ANY TIME A BOARDER IS CROSSED, IT MUST BE ACCOM-
PAINED BY A COMMERCIAL PRICE PACKING SLIP/INVOICE,
WHICH INCLUDES THE FOLLOWING:
LETTERHEAD AT THE TOP
DATE, DESTINATION, SHIPPER NUMBER
CONTENTS, QUANTITY, UNIT PRICE, TOTAL PRICE
COUNTRY OF ORIGIN
PURCHASE ORDER NUMBER

01033 USER SUZANNE J BEARDSLEY ORIGINAL CONTINUE PAGE 9

11/14/2010 21:42 6163993743

WEST MICHIGAN SPLINE

PAGE 10

DELPHI SAGINAW STEERING SYSTEM
3900 HOLLAND RD.
SAGINAW MI 48601
US

SHIP TO:
DELPHI SAGINAW ACE PLT 65
SANTA ROSA DE VITERBO 12
PARQUE IND. BERNARDO QUINTANA
MUNICIPIO EL MARQUES
QUERETARO MX
76246
DELPHI
INVOICE TO:
SEE INVOICE
INSTRUCTIONS 00
00000
US

VENDOR NUMBER 79-870-1702
WEST MICHIGAN SPLINE INC
156 MANUFACTURERS DR
HOLLAND MI 49424

This order is not binding until accepted. Acceptance is deemed an acknowledgment of receipt of goods and services. The Buyer and Seller agree to the terms and conditions of which Seller agrees by acceptance of this order. The order, including the terms and conditions, shall be the basis of the contract between the Buyer and Seller and no other terms or conditions shall be binding on the Buyer or Seller. If Government Contract Number is shown, additional terms and conditions attached thereto apply.

This Number Must Appear On All Invoices, Packing Slips, Packages and Bills of Lading.
(2) copies of your packing slip must accompany each shipment.
Item Identification Number(s) must be shown on Packing Slips and Invoices.
Invoice Attn: Accounts Payable
Do not Declare Valuation of Express Shipments or Insure Parcel Post.

ORDER DATE 10/12/04	PHONE: 989-757-4071
ALTERATION EFFECTIVE DATE	K HUNTER
ALTERATION ISSUE DATE	S17
ALTERATION EFFECTIVE DATE	Buyer

NET 2ND DAY/2ND MTH-10% HLDBK F.O.B. DESTINATION UNLESS OTHERWISE INDICATED
DELPHI'S PREFERRED CARRIER
SHIP VIA SEE BELOW PURCHASING AGENT

ITEM EVIDENCE	QUANTITY ORDERED	ITEM IDENTIFICATION NO.	QUANTITY	DESCRIPTION	RFO NUMBER	DATE REQUIRED	TAX CODE %	BASE UNIT PRICE	PRICE MULTIPLE	UNIT
---------------	------------------	-------------------------	----------	-------------	------------	---------------	------------	-----------------	----------------	------

SHIPPED VIA
SIGNATURE AND TITLE

WARRANTY PERIOD BEGINS AT START OF PRODUCTION.

THIS IS A CAPITAL EQUIPMENT OR CONSTRUCTION
INVOICELESS PURCHASE ORDER.
1. SEND ALL PRICED PACKING SLIPS (OR INVOICES IF YOU PREFER) PERTAINING TO THIS ORDER TO
MARK ROYOLL/989-757-4798
2. ADDRESS AND MAIL YOUR PRICED PACKING SLIPS (OR INVOICE) DIRECTLY TO THIS PERSON AT THE ADDRESS LISTED ABOVE UNDER "INVOICE TO". THIS PERSON WILL BE YOUR POINT OF CONTACT FOR ALL MATTERS PERTAINING TO PAYMENT OF THIS PURCHASE ORDER. COMPLIANCE TO THESE GUIDELINES WILL PROMOTE PROMPT PAYMENT.
TERMS AND CONDITIONS JANUARY 2001, APPLY
OF WHICH SUPPLIER HAS RECEIVED A COPY.

01033 USER SUZANNE J BEARDSLEY ORIGINAL LAST PAGE



WEST MICHIGAN SPLINE, INC.
156 MANUFACTURERS DR.
HOLLAND, MI 49424 USA
616-399-5550 PHONE
616-399-3743 FAX

*WMS Received Delphi
Payment on 9/6/05*

Invoice

Date	Invoice #
7/14/2005	2-694

Bill To
DELPHI AUTOMOTIVE SYSTEMS SAGINAW STEERING SYSTEMS ATTN: MR. KEN HUNTER 3900 HOLLAND RD. PLANT 5 SAGINAW MI 48601

Ship To
DELPHI SAGINAW ACE PLT 65 SANTA ROSA DE VITERBO 12 PARQUE IND. BERNARDO QUITANA MUNICIPIO EL MARQUES QUERETARO MX 76246

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
S2M81552	2ND DAY/2ND ...		7/14/2005	ARTISAN	HOLLAND MI	2-694
Quantity	Item Code	Description			Price Each	Amount
1	NEW MACHINE	STANDARD WMS MODEL 48D SPLINE ROLLER, S/N 2-694 FOR SPLINES AND THREADS. REFERENCE RFP 2412, DPR #A4480002, TAG #140080, PR379470-001, MARK ROVOLL			254,069.10	254,069.10
1	NEW MACHINE	AUTOLOAD MACHINE USING ROBOT CONCEPT, PR379470-002			52,424.10	52,424.10
1	NEW MACHINE	PACKAGE FOR SHIPMENT, PR379470-003			1,850.40	1,850.40
1	NEW MACHINE	PART LOCATING LIVE CENTERS-HEADSTOCK, PR379470-004			681.30	681.30
1	NEW MACHINE	PART LOCATING LIVE CENTERS-HEADSTOCK, PR379470-005			681.30	681.30
1	NEW MACHINE	PART SUPPORT BRACKET, PR379470-006			3,470.40	3,470.40
1	NEW MACHINE	PART WEAR PADS FOR SUPPORT BRACKET, PR379470-007			872.10	872.10
3	NEW MACHINE	RACK SPACERS, PR379470-008			969.30	2,907.90
<i>RECEIVED</i> <i>M. Brody</i> <i>(Run Date)</i> <i>7/2/05</i>				Total		





WEST MICHIGAN SPLINE, INC.

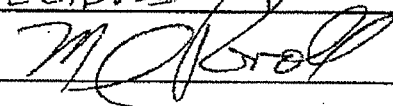
156 MANUFACTURERS DR.
HOLLAND, MI 49424 USA
616-399-5550 PHONE
616-399-3743 FAX

Invoice

Date	Invoice #
7/14/2005	2-694

Bill To
DELPHI AUTOMOTIVE SYSTEMS SAGINAW STEERING SYSTEMS ATTN: MR. KEN HUNTER 3900 HOLLAND RD. PLANT 5 SAGINAW MI 48601

Ship To
DELPHI SAGINAW ACE PLT 65 SANTA ROSA DE VITERBO 12 PARQUE INDL BERNARDO QUITANA MUNICIPIO EL MARQUES QUERETARO MX 76246

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
S2M81552	2ND DAY/2ND ...		7/14/2005	ARTISAN	HOLLAND MI	2-694
Quantity	Item Code	Description			Price Each	Amount
1	NEW MACHINE	BLUE STEEL CONVEYOR WITH ROLLERS, PR379470-009			14,996.70	14,996.70
1	NEW MACHINE	PROFILE GATES FOR ERROR PROOFING, PR379470-010			6,003.00	6,003.00
1	NEW MACHINE	CHIP BLOW OFF UNIT, PR379470-011			1,251.00	1,251.00
1	NEW MACHINE	PART ESCAPEMENT ASSEMBLY FOR METERING, PR379470-012			8,870.40	8,870.40
1	NEW MACHINE	CROSS HOLE DETECTION GAGE, PR379470-013			10,881.00	10,881.00
1	NEW MACHINE	SPLINE RACK IDENTIFICATION SYSTEM, PR379470-014			0.00	0.00
1	NEW MACHINE	PART SHUTTLE FOR PART SEPARATION AT WASHER, PR379470-015			1,303.20	1,303.20
1	NEW MACHINE	CUT SLOT FOR ERROR PROOF IN MX-1663 AS DESCRIBED BY DRAWING. 15.50" FROM EDGE AT A LENGTH OF .7426" AND RADIUS 0.125", PR379470-016			144.00	144.00
<div> <div>RECEIVED</div> <div>  </div> </div>				<div> <div>(Running Date)</div> <div>7/2/05</div> </div>		
					Total	



WEST MICHIGAN SPLINE, INC.

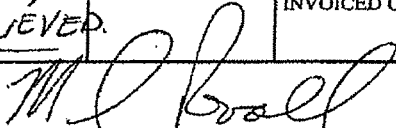
156 MANUFACTURERS DR.
HOLLAND, MI 49424 USA
616-399-5550 PHONE
616-399-3743 FAX

Invoice

Date	Invoice #
7/14/2005	2-694

Bill To
DELPHI AUTOMOTIVE SYSTEMS SAGINAW STEERING SYSTEMS ATTN: MR. KEN HUNTER 3900 HOLLAND RD. PLANT 5 SAGINAW MI 48601

Ship To
DELPHI SAGINAW ACE PLT 65 SANTA ROSA DE VITERBO 12 PARQUE INDL BERNARDO QUITANA MUNICIPIO EL MARQUES QUERETARO MX 76246

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
S2M81552	2ND DAY/2ND ...		7/14/2005	ARTISAN	HOLLAND MI	2-694
Quantity	Item Code	Description			Price Each	Amount
1	NEW MACHINE	COUNTER BORE 1.25" DIA .25DP IN MX-1164 FOR ERROR PROOF CHIP AS DESCRIBED BY DRAWING 0.875" FROM BOTTOM AT LOCATION OF 21.375", PR379470-017			90.00	90.00
1	NEW MACHINE	CUT SLOT FOR ERROR PROOF IN MX-1165 AS DESCRIBED BY DRAWING. 15.50" FROM EDGE AT A LENGTH OF .7426" AND RADIUS 0.125", PR379470-018			144.00	144.00
1	NEW MACHINE	COUNTER BORE 1.25" DIA .25DP IN MX-1166 FOR ERROR PROOF CHIP AS DESCRIBED BY DRAWING 0.875" FROM BOTTOM AT A LOCATION OF 21.375" FROM EDGE, PR379470-019			90.00	90.00
		NOTE: ALL COSTS ARE IN US FUNDS. THIS INVOICE REFLECTS 90% OF TOTAL ORDER INVOICED UPON RUN-OFF AT WMS. (WITH THE EXCEPTION OF ITEM 00014 ON DELPHI PO #S2M81552-001, SPLINE RACK IDENTIFICATION SYSTEM). TOTAL ORDER IS \$427779.00. THE REMAINING 10% WILL BE INVOICED UPON SET-UP AT DELPHI MX.				
7/2/05 - Runoff RECEIVED. 				Total \$360,729.90		

OK TO PAY ROBIN MILAVET

[Signature] 02/20/05



WEST MICHIGAN SPLINE, INC.
156 MANUFACTURERS DRIVE
HOLLAND, MI 49424 USA
PHONE, 616-399-5550
FAX, 616-399-3743

SHIP TO:

DELPHI SAG LAREDO DIST CTR, PLT 44
ATTN: CLAUDIASALINAS
13701 MINES ROAD
LAREDO TEXAS 78045 USA

956-693-3379 FAX—956-693-5182

SHIPPER

NO. 2-694

DATE: 07/14/2005

Truck 1 - Shipment #482647

ACCT NO.	DATE SHIPPED	SHIPPED VIA	GROSS WEIGHT	ORDER NUMBER
	07/14/2005	Fitzley Inc	40000 LBS	S2M81552,001,002

ITEM	DESCRIPTION	QUANTITY	CONTAINER
1	NEW WMS MODEL 48D SPLINE ROLLING MACHINE, S/N 2-694, TO INCLUDE THE FOLLOWING PARTS UNDER S/N 2-694, WHICH WERE BROKEN DOWN FOR SHIPPING:	ONE	MACHINE
2	ONE NEW HYDRAULIC POWER UNIT	ONE	HYD UNIT

SPECIAL INSTRUCTIONS:

FINAL DESTINATION: DELPHI SAGINAW-ACE
PLANT 65, SANTA ROSA DE VITERBO
12, PARQUE INDL BERNARDO QUINTANA, MU-
NICPIO EL MARQUES, QUERETARO MX 76246

CARRIER SIGNATURE:

DEPARTMENT OF THE TREASURY
UNITED STATES CUSTOMS SERVICE

PROTECTED (when completed)

North American Free Trade Agreement

CERTIFICATE OF ORIGIN

(Instructions Attached)
19 CFR 181.11, 181.22

OMB No. 1515-0204
See back of form for Paper-
work Reduction Act Notice.

Please Print or Type

1 Exporter's Name and Address: West Michigan Spline Inc 156 Manufacturers Drive Holland MI 49424 USA		2 Blanket Period: From <u>14</u> <u>07</u> <u>05</u> To <u>14</u> <u>07</u> <u>06</u>	
Tax Identification Number: <u>38-3061806</u>			
3 Producer's Name and Address: West Michigan Spline Inc 156 Manufacturers Drive Holland MI 49424 USA		4 Importer's Name and Address: Delphi Saginaw Ace Plant 65 Santa Rosa De Viterbo 12 Parque Industrial Bernardo Quintana Municipio El Marques Queretaro MX 76246	
Tax Identification Number: <u>38-3061806</u>		Tax Identification Number: <u></u>	

Description of Good(s)	6 HS Tariff Classification Number	7 Preference Criterion	8 Producer	9 Net Cost	10 Country of Origin
One WMS Model 48D Spline Rolling Machine S/N 2-694 Which Includes the Following Items Broken down for ship: One Hydraulic Power Unit One Set Fench Guarding One Robot Stand and Part Blow Off One Robot and Control One Exit Conveyor One Entrance Conveyor, (Blue) One Entrance Conveyor, (Yellow, Green, Orange) One Escape Conveyor, (Blue)	8463.90 9099	B	No 1	427,779.00	USA

I certify that:

- the information on this document is true and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document;
- I agree to maintain, and present upon request, documentation necessary to support this Certificate, and to inform, in writing, all persons to whom the Certificate was given of any changes that would affect the accuracy or validity of this Certificate;
- the goods originated in the territory of one or more of the Parties, and comply with the origin requirements specified for those goods in the North American Free Trade Agreement, and unless specifically exempted in Article 411 or Annex 401, there has been no further production or any other operation outside the territories of the Parties; and
- this Certificate consists of one pages, including all attachments.

Authorized Signature: <u>Marie A Hill</u>		Company: <u>West Michigan Spline Inc</u>	
Name: <u>Marie A Hill</u>		Title: <u>Office Manager</u>	
Date (DD / MM / YY): <u>14/07/05</u>	Telephone: <u>616-399-5550</u>	FAX: <u>616-399-3743</u>	

CUSTOMS INVOICE

Page 1 of 1

1. Vendor (Name and Address) West Michigan Spline Inc 156 Manufacturers Drive Holland MI 49424 USA		2. Date of Direct Shipment to 14/07/2005	
		3. Other References (Include Purchaser's Order No.) PO #S2M81552, 001, 002, Shipper 2-694	
4. Consignee (Name and Address) Delphi Sag Laredo Dist Ctr, Plant 44 Attn: Claudia Salinas 13701 Mines Road Laredo Texas 78045		5. Purchaser's Name and Address (If other than Consignee) Delphi Saginaw Ace Plant 65 Santa Rosa DeViterbo 12 Parque Industrial Bernardo Quintana Municipio El Marques Queretaro Mexico 76246	
		6. Country of Transshipment none	
		7. Country of Origin of Goods USA	IF SHIPMENT INCLUDES GOODS OF DIFFERENT ORIGIN ENTER ORIGINS AGAINST ITEMS IN 12.
8. Transportation: Give Mode and Place of Direct Shipment to Canada Fitzley Inc		9. Conditions of Sale and Terms of Payment (i.e. Sale, Consignment Shipment, Leased Goods, etc.) New Sale, Net 30 Days	
		10. Currency of Settlement US Funds	
11. No. of Pkgs	12. Specification of Commodities (Kind of Packages, Marks and Numbers, General Description and Characteristics, i.e. Grade, Quality)	13. Quantity (State Unit)	14. Unit Price 15. Total
One	Flat Bed Truck Containing: (Truck 1) One WMS Model 48D Spline Roller, S/N 2-694 & One new Hydraulic Power Unit		
Two	Second Flat Bed Truck Containing: (Truck 2) One Set Fence Guarding One Set Robot Stand and Part Blow Off One Set Robot Control and Panel One Part Exit Conveyor One Set Entrance Conveyor (Blue) One Set Entrance Conveyor, (Yellow, Green, Or) One Set Escape Conveyor (Blue) HS Tarriff Class: 8463.90.9099 NOTE: Lot Price is for contents of both Trucks One and Two. Order is broken down for shipment.	Lot Price	427779.00 427779.00
18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box <input type="checkbox"/> Commercial Invoice No. _____		16. Total Weight Net Gross 50000 lbs	
19. Exporter's Name and Address (If other than Vendor)		17. Invoice Total 427779.00	
20. Originator (Name and Address) Marie Hill West Michigan Spline Inc 156 Manufacturers Drive Holland MI 49424 USA			
21. Departmental Ruling (If applicable)		22. If fields 23 to 25 are not applicable, check this box <input checked="" type="checkbox"/>	
23. If included in field 17 indicate amount: (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada \$ _____ (ii) Costs for construction, erection and assembly incurred after importation into Canada	24. If not included in field 17 indicate amount: (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada \$ _____ (ii) Amounts for commissions other than buying commissions	25. Check (If applicable): (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser <input type="checkbox"/>	



WEST MICHIGAN SPLINE, INC.
156 MANUFACTURERS DR.
HOLLAND, MI 49424 USA
616-399-5550 PHONE
616-399-3743 FAX

Invoice

Date	Invoice #
8/31/2005	2-693

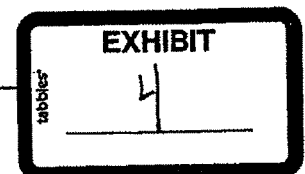
Bill To DELPHI AUTOMOTIVE SYSTEMS SAGINAW STEERING SYSTEMS ATTN: MR. STEVE SCHULZE 3900 HOLLAND RD. PLANT 5 SAGINAW MI 48601	Ship To DELPHI SAGINAW ACE PLANT 65 SANTA ROSA DE VITERBO 12 PARQUE INDL BERNARDO QUINTANO MUNICIPIO EL MARQUES QUERETARO MEXICO 76246
--	--

7 New PO# 450164109

90%
10/6/05
WMS Received

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
S2M81551, 001	2ND DAY/2ND MTH		7/28/2005	ARTISAN	HOLLAND MI	2-693

Quantity	Item Code	Description	Price Each	Amount
1	REBUILD	REBUILT ANDERSON COOK MODEL 350-S SPLINE ROLLING MACHINE, S/N 352, PER RFQ 2411, PR379471 001	151,663.50	151,663.50
1	REBUILD	AUTO LOAD MACHINE USING ROBOT CONCEPT, PR379471 002	28,686.60	28,686.60
1	REBUILD	PACKAGE FOR SHIPMENT, PR379471 003	1,850.40	1,850.40
3	REBUILD	PART LOCATING LIVE CENTERS-HEADSTOCK, PR379471 004	681.30	2,043.90
3	REBUILD	PART LOCATING LIVE CENTERS-TAILSTOCK, PR379471 005	681.30	2,043.90
1	REBUILD	PART SUPPORT BRACKET, PR379471 006	1,724.40	1,724.40
2	REBUILD	RACK SPACERS, PR379471 008	970.20	1,940.40
1	REBUILD	NEW RACK BOX TO HOLD SPLINE RACKS, PR379471 009	40,988.70	40,988.70
1	REBUILD	DESIGN AND BUILD LOADER, ENTRANCE CHUTE, EXIT CHUTE MOUNTING BRACKET, PART SUPPORT BRACKET, AND LIMIT SWITCHES FOR I-SHAFT, PR379471 010	11,682.00	11,682.00
1	REBUILD	INSTALL TWO POSITION TAILSTOCK, PR379471 011	3,951.00	3,951.00
1	REBUILD	LABOR TO INSTALL CHANGES AND PROVIDE RUN-OFF, PR379471 012	7,610.40	7,610.40
Total				





WEST MICHIGAN SPLINE, INC.
156 MANUFACTURERS DR.
HOLLAND, MI 49424 USA
616-399-5550 PHONE
616-399-3743 FAX

Invoice

Date	Invoice #
8/31/2005	2-693

Bill To DELPHI AUTOMOTIVE SYSTEMS SAGINAW STEERING SYSTEMS ATTN: MR. STEVE SCHULZE 3900 HOLLAND RD. PLANT 5 SAGINAW MI 48601	Ship To DELPHI SAGINAW ACE PLANT 65 SANTA ROSA DE VITERBO 12 PARQUE INDL BERNARDO QUINTANO MUNICIPIO EL MARQUES QUERETARO MEXICO 76246
--	--

7 New Po # 450164109

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
S2M81551, 001	2ND DAY/2ND MTH		7/28/2005	ARTISAN	HOLLAND MI	2-693
Quantity	Item Code	Description			Price Each	Amount
		NOTE: ALL COSTS ARE IN US FUNDS. THIS INVOICE REFLECTS 90% OF TOTAL ORDER, INVOICED UPON RUN-OFF AT WMS. THE REMAINING 10% WILL BE INVOICED UPON SET-UP AT DELPHI ACE PLANT 65, QUERETARO MEXICO.				
					Total	\$254,185.20



WEST MICHIGAN SPLINE, INC.
156 MANUFACTURERS DRIVE
HOLLAND, MI 49424 USA
PHONE, 616-399-5550
FAX, 616-399-3743

PAGE 1 OF 2

SHIP TO:

DELPHI SAG LAREDO DIST CTR, FLT 44
ATTN: CLAUDIA SALINAS
13701 MINES ROAD
LAREDO TEXAS 78045 USA
956-693-3379 FAX-956-693-5182

SHIPPER

NO. 2-693

DATE: 09/09/2005

*Did Not Ship Until 9/9/05
Due to Delphi lining up Transportation.*

ACCT NO.	DATE SHIPPED	SHIPPED VIA	GROSS WEIGHT	ORDER NUMBER
	09/09/2005	ARTISAN	40,000 LBS	S2M81551 & 001

#492589

ITEM	DESCRIPTION	QUANTITY	CONTAINER
1	REBUILT ANDERSON COOK 350-S SPLINE ROLLER, S/N 352, PER RFQ 2411, INCLUDES 2 POSITION TAILSTOCK & AUTO LOAD.	ONE	MACHINE
2	NEW HYDRAULIC POWER UNIT, P/N 2693-HYD	ONE	HYD UNIT
3	NEW RACK BOX W/RACK SPACERS P/N MX1305-ASM-001-001	ONE	MACHINE
4	PART SUPPORT BRACKET, P/N MX1304-ASM-001-001	ONE	PALLET
5	3 SETS HEADSTOCK CENTERS, P/N MX1301-DET-002-001, 3 SETS TAILSTOCK CENTERS, P/N MX1301-DET-003-001	SIX SETS	2 - MACHINE 4 - PALLET
6	LOADER W/ ENTRANCE & EXIT CHUTES, P/N MX1175 & MX1300	ONE SET	PALLET
7	FOUR SETS SPLINE RACKS: ONE SET, #MX1172, S/N AC-M146 ONE SET, #MX1167, S/N AC-L997 ONE SET, #MX1178, S/N AC-M000 ONE SET, #MX1178, S/N AC-L999	FOUR SETS	PALLET

SPECIAL INSTRUCTIONS:

CARRIER SIGNATURE: _____

U.S. DEPARTMENT OF HOMELAND SECURITY
Bureau of Customs and Border Protection

OMB No. 1651-0098
See back of form for Paperwork Reduction Act Notice.

NORTH AMERICAN FREE TRADE AGREEMENT
CERTIFICATE OF ORIGIN

Please print or type

19 CFR 181.11, 181.22

1. EXPORTER NAME AND ADDRESS WEST MICHIGAN SPLINE INC 156 MANUFACTURERS DRIVE HOLLAND MI 49424 USA TAX IDENTIFICATION NUMBER: 38-3061806		2. BLANKET PERIOD FROM 29/08/05 TO 29/08/06 <i>(82785 Machine Ready to Ship - did not ship it)</i> <i>9/9/05 - Delphi lining up truck.</i>	
3. PRODUCER NAME AND ADDRESS WEST MICHIGAN SPLINE INC 156 MANUFACTURERS DRIVE HOLLAND MI 49424 USA TAX IDENTIFICATION NUMBER: 38-3061806		4. IMPORTER NAME AND ADDRESS DELPHI SAGINAW-ACE PLANT 65, SANTA ROSA DE VITERBO 12, PARQUE IND BERNARDO QUINTANA MUNICIPIO EL MARQUES, QUERETARO MX 76246 TAX IDENTIFICATION NUMBER:	

5. DESCRIPTION OF GOOD(S)	6. HS TARIFF CLASSIFICATION NUMBER	7. PREFERENCE CRITERION	8. PRODUCER	9. NET COST	10. COUNTRY OF ORIGIN
ONE REBUILT ANDERSON COOK 350-S SPLINE ROLLER, S/N 352 INCLUDES 2 POSITION TAILSTOCK & AUTOLOAD.	8463.90	B	NO 1	185791.00	USA
ONE NEW HYDRAULIC POWER SYSTEM, P/N 2693-HYD	8463.90	B	NO 1	29500.00	USA
NEW RACK BOX WITH RACK SPACERS, P/N MX1305-ASM-001-001	8463.90	B	NO 1	47699.00	USA
1 SET PART SUPPORT BRACKET, P/N MX1304-ASM-001-001	8463.90	B	NO 1	1916.00	USA
3 SETS HEADSTOCK CENTERS, P/N MX1301-DET-002-001	8463.90	B	NO 1	2271.00	USA
3 SETS TAILSTOCK CENTERS, P/N MX1301-DET-003-001	8463.90	B	NO 1	2271.00	USA
LOADER W/ENTRANCE & EXIT CHUTES, P/N MX1175 & MX1300	8463.90	B	NO 1	12980.00	USA

I CERTIFY THAT:

- THE INFORMATION ON THIS DOCUMENT IS TRUE AND ACCURATE AND I ASSUME THE RESPONSIBILITY FOR PROVING SUCH REPRESENTATIONS. I UNDERSTAND THAT I AM LIABLE FOR ANY FALSE STATEMENTS OR MATERIAL OMISSIONS MADE ON OR IN CONNECTION WITH THIS DOCUMENT;
- I AGREE TO MAINTAIN AND PRESENT UPON REQUEST, DOCUMENTATION NECESSARY TO SUPPORT THIS CERTIFICATE, AND TO INFORM, IN WRITING, ALL PERSONS TO WHOM THE CERTIFICATE WAS GIVEN OF ANY CHANGES THAT COULD AFFECT THE ACCURACY OR VALIDITY OF THIS CERTIFICATE;
- THE GOODS ORIGINATED IN THE TERRITORY OF ONE OR MORE OF THE PARTIES, AND COMPLY WITH THE ORIGIN REQUIREMENTS SPECIFIED FOR THOSE GOODS IN THE NORTH AMERICAN FREE TRADE AGREEMENT AND UNLESS SPECIFICALLY EXEMPTED IN ARTICLE 411 OR ANNEX 401, THERE HAS BEEN NO FURTHER PRODUCTION OR ANY OTHER OPERATION OUTSIDE THE TERRITORIES OF THE PARTIES; AND
- THIS CERTIFICATE CONSISTS OF ONE PAGES, INCLUDING ALL ATTACHMENTS.

11a. AUTHORIZED SIGNATURE <i>Marie A. Hill</i>		11b. COMPANY WEST MICHIGAN SPLINE INC	
11c. NAME (Print or type) MARIE A HILL		11d. TITLE OFFICE MANAGER	
11e. DATE (MM/DD/YYYY) 09/09/2005	11f. TELEPHONE NUMBER 616-399-5550	11g. FACSIMILE 616-399-3743	



Canada Customs
and Revenue Agency

Agence des douanes
et du revenu du Canada

CANADA CUSTOMS INVOICE
FACTURE DES DOUANES CANADIENNES

Page 1 of 1

1. Vendor (name and address) - Vendeur (nom et adresse) WEST MICHIGAN SPLINE INC 156 MANUFACTURERS DRIVE HOLLAND MI 49424 USA		2. Date of direct shipment to Canada - Date d'expédition directe vers le Canada 09/09/2005	
4. Consignee (name and address) - Destinataire (nom et adresse) DELPHI SAGINAW LAREDO DISTRIBUTION CTR, PLANT 44 ATTN: CLAUDIA SALINAS 13701 MINES ROAD LAREDO TEXAS 78045 USA		5. Purchaser's name and address (if other than consignee) Nom et adresse de l'acheteur (s'il diffère du destinataire) DELPHI SAGINAW ACE PLANT 65 SANTA ROSA DEVITERBO 12 PARQUE INDUSTRIAL BERNARDO QUINTANA MUNICIPIO EL MARQUES QUERETARO MX 76246	
8. Transportation: Give mode and place of direct shipment to Canada Transport : Précisez mode et point d'expédition directe vers le Canada ARTISAN #492589		9. Conditions of sale and terms of payment (i.e. sale, consignment shipment, leased goods, etc.) Conditions de vente et modalités de paiement (p. ex. vente, expédition en consignation, location de marchandises, etc.) NEW SALE, NET 2ND DAY 2ND MO	
		10. Currency of settlement - Devises du paiement US FUNDS	

11. Number of packages Nombre de colis	12. Specification of commodities (kind of packages, marks and numbers, general description and characteristics, i.e., grade, quality) Designation des articles (nature des colis, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité)	13. Quantity (state unit) Quantité (précisez l'unité)	14. Selling price - Prix de vente	
			Unit price Prix unitaire	Total
6	1 REBUILT ANDERSON COOK 350-S SPLINE ROLLER, S/N 352, PER RFQ 2411, INCLUDES 2 POS TAILSTOCK & AUTOLOAD	1.000	185,791.00	185,791.00
	1 NEW HYDRAULIC POWER SYSTEM, P/N 2693-HYD	1.000	29,500.00	29,500.00
	1 RACK BOX, W/RACK SPACERS, P/N MX1305-ASM-001-001	1.000	47,699.00	47,699.00
	1 SETS PART SUPPORT BRACKETS, P/N MX1304-ASM-001-001	1.000		0.00
	3 SETS HEADSTOCK CENTERS, P/N MX1301-DET-002-001	3.000	757.00	2,271.00
	3 SETS TAILSTOCK CENTERS, P/N MX1301-DET-003-001	3.000	757.00	2,271.00
	ONE LOADER WITH ENTRANCE & EXIT CHUTES, P/N MX1175 & P/N MX1300	1.000	12,980.00	12,980.00
				0.00
				0.00
				0.00

18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box Si tout renseignement relatif aux zones 1 à 17 figure sur une ou des factures commerciales ci-jointes, cochez cette case Commercial Invoice No. / N° de la facture commerciale		16. Total weight - Poids total Net 38000 LBS		17. Invoice total Total de la facture 282428.00
19. Exporter's name and address (if other than vendor) Nom et adresse de l'exportateur (s'il diffère du vendeur)		20. Originator (name and address) - Expéditeur d'origine (nom et adresse) MARIE HILL WEST MICHIGAN SPLINE INC 156 MANUFACTURERS DRIVE HOLLAND MI 49424 USA		
21. CCRA ruling (if applicable) - Décision de l'Agence (s'il y a lieu)		22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cochez cette case <input checked="" type="checkbox"/>		
23. If included in field 17 indicate amount: Si compris dans le total à la zone 17, précisez : (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada (ii) Costs for construction, erection and assembly incurred after importation into Canada Les coûts de construction, d'érection et d'assemblage après importation au Canada (iii) Export packing Le coût de l'emballage d'exportation		24. If not included in field 17 indicate amount: Si non compris dans le total à la zone 17, précisez : (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada (ii) Amounts for commissions other than buying commissions Les commissions autres que celles versées pour l'achat (iii) Export packing Le coût de l'emballage d'exportation		25. Check (if applicable): Cochez (s'il y a lieu): (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser Des redevances ou produits ont été ou seront versés par l'acheteur (ii) The purchaser has supplied goods or services for use in the production of these goods L'acheteur a fourni des marchandises ou des services pour la production de ces marchandises

Dans ce formulaire, toutes les expressions désignent des personnes visant à la fois les hommes et les femmes.

VENDOR DUNS NO. RD. 798701702
VENDOR NAME WEST MICHIGAN SPLINE INC
Delphi Disbursement Services
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO. 900521061
PAYMENT DATE 10/03/05
DETACH BEFORE DEPOSITING CHECK

REGISTER NO.	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
900003108531	08/31/05	K9 051853320001	00.0000	254,185.20	.00	254,185.20
22891851	08/31/05					
FLT: DELPHI SAGINAW HQTRS						
P/N: PR379471001	QTY: 1.000	UOM: EA	U/P: 28,242.80000-	EXT: 28,242.80-	EXT: 28,242.80-	
P/N: PR379471002	QTY: 1.000	UOM: U/P	U/P: 168,515.00000	EXT: 168,515.00	EXT: 168,515.00	
P/N: PR379471003	QTY: 1.000	UOM: PC	U/P: 31,874.00000	EXT: 31,874.00	EXT: 31,874.00	
P/N: PR379471004	QTY: 1.000	UOM: U/P	U/P: 2,056.00000	EXT: 2,056.00	EXT: 2,056.00	
P/N: PR379471005	QTY: 1.000	UOM: EA	U/P: 757.00000	EXT: 757.00000	EXT: 757.00000	
P/N: PR379471006	QTY: 1.000	UOM: EA	U/P: 1,916.00000	EXT: 1,916.00	EXT: 1,916.00	
P/N: PR379471007	QTY: 1.000	UOM: EA	U/P: 1,079.00000	EXT: 1,079.00000	EXT: 1,079.00000	
P/N: PR379471008	QTY: 1.000	UOM: PC	U/P: 45,543.00000	EXT: 45,543.00	EXT: 45,543.00	
P/N: PR379471009	QTY: 1.000	UOM: U/P	U/P: 12,980.00000	EXT: 12,980.00	EXT: 12,980.00	
P/N: PR379471010	QTY: 1.000	UOM: PC	U/P: 4,390.00000	EXT: 4,390.00	EXT: 4,390.00	
P/N: PR379471011	QTY: 1.000	UOM: U/P	U/P: 8,456.00000	EXT: 8,456.00	EXT: 8,456.00	
P/N: PR379471012	QTY: 1.000	UOM: PC	U/P: 8,456.00000	EXT: 8,456.00	EXT: 8,456.00	
FOR PMT INFO USE E-DACOR HTTP://DELPHI.COVISINT.COM / ISSUES(PRIC						
ING CALL BUYER)(QTY CALL PLANT)(OTHER CUSISERV:248 874-4636) NB						
TOTAL				254,185.20	.00	254,185.20

Rec
10/6/05